

Docket No.  
Z70402-1P US

## DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if multiple names are listed below) of the subject matter which is claimed and for which a patent is sought on an invention entitled:

### **NAPHTHALENECARBOXAMIDES AS TACHYKININ RECEPTOR ANTAGONISTS**

the specification of which

\_\_\_\_\_ is attached hereto  
☒ was filed on October 4, 1999 as United States Application Number or PCT International Application Number PCT/GB99/03274 and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)			Priority Claimed	
Number	Country	Filing Date	Yes	No
9821699.7	GB	7 October 1998	X	
9906278.8	GB	17 March 1999	X	
9909839.4	GB	30 April 1999	X	

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number	Filing Date

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT International Application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.

Application Number	Filing Date	Status

## DECLARATION FOR PATENT APPLICATION

Page 2 of 3

I hereby appoint the attorney(s) and/or agent(s) associated with Customer Number 22466 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to:

Patent Administrator  
CW-2, 418  
AstraZeneca Pharmaceuticals LP  
Global Intellectual Property  
1800 Concord Pike  
Wilmington, DE 19850-5437

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) Peter Robert Bernstein

Inventor's signature Peter Robert Bernstein

Date 03/29/01

Residence 1800 Concord Pike

Citizenship United States

Wilmington, DE 19803

DE

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

Full name of second inventor, if any (given name, family name) Robert Frank Dedinas

Inventor's signature Robert Frank Dedinas

Date March 29, 2001

Residence 1800 Concord Pike

Citizenship United States

Wilmington, DE 19803

DE

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

Full name of third inventor, if any (given name, family name) Cyrus John Ohnmacht

Inventor's signature Cyrus John Ohnmacht

Date March 29, 2001

Residence 1800 Concord Pike

Citizenship United States

Wilmington, DE 19803

DE

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

4<sup>00</sup>  
Full name of fourth inventor, if any (given name, family name) Keith RussellInventor's signature [Signature]

Date

3/29/01Residence 1800 Concord PikeCitizenship BritishWilmington, DE 19803DEPost Office Address P. O. Box 15437, Wilmington, DE 19850-54375<sup>00</sup>  
Full name of fifth inventor, if any (given name, family name) Scott Alan Sherwood

Inventor's signature \_\_\_\_\_

Date \_\_\_\_\_

Residence 449 Crestview DriveCitizenship United StatesPittsburgh, PA 15239PA

Post Office Address \_\_\_\_\_

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Full name of sole or first inventor (given name, family name) Peter Robert Bernstein

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence 1800 Concord Pike Citizenship United States  
Wilmington, DE 19803

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

Full name of second inventor, if any (given name, family name) Robert Frank Dedinas

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence 1800 Concord Pike Citizenship United States  
Wilmington, DE 19803

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

Full name of third inventor, if any (given name, family name) Cyrus John Ohnmacht

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence 1800 Concord Pike Citizenship United States  
Wilmington, DE 19803

Post Office Address P.O. Box 15437, Wilmington, DE 19850-5437

Full name of fourth inventor, if any (given name, family name) Keith Russell

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence 1800 Concord Pike Citizenship United States  
Wilmington, DE 19803Post Office Address P. O. Box 15437, Wilmington, DE 19850-5437Full name of fifth inventor, if any (given name, family name) Scott Alan SherwoodInventor's signature  Date March 27, 2001Residence 449 Crestview Drive Citizenship United States  
Pittsburgh, PA 15239

Post Office Address \_\_\_\_\_